

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 913453	RECEIPT DATE:	08 / 14 / 01
IA NUMBER:	PCT/ GB00 / 00504	IA FILING DATE:	02 / 15 / 00
FAMILY NAME:	FROUDLER	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	GRAEME JONH	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	02 / 15 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	B-4276PCT 61	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 3239342300
			FAX
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STREET:	5670 WILSHIRE BLVD., #2100		
CITY:	LOS ANGELES		
STATE/COUNTRY:	CA	ZIP:	900365679
EMAIL:			
APPLICATION TITLES:			
	COMMUNICATIONS BETWEEN MODULES OF COMPUTING APPARATUS		

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 9595

<b>SERIAL NUMBER</b> 09/913,453	<b>FILING DATE</b> 08/14/2001 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2151	<b>ATTORNEY DOCKET NO.</b> B-4276PCT 619003-1
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**APPLICANTS**

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David Chan, Monte Sereno, CANADA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A 371 OF PCT/GB00/00504 02/15/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

EUROPEAN PATENT OFFICE (EPO) 99301100.6 02/15/1999  
EUROPEAN PATENT OFFICE (EPO) 99306416.1 08/13/1999

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

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Hewlett Packard Company  
3404 East Harmony Road  
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**TITLE**

Communications between modules of a computing apparatus

<b>FILING FEE RECEIVED</b> 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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